SENDER: COMPLETE THIS SECTION TEM	COMPLETE THIS SECTION ON DELIVERY 2006 Page 1 of 2
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:    DOMIAL   BAWK     DOBOX   1/08     WYON   ComeRY   HI?   36/10/1-/108	A. Signature  X Agent Addressee  B. Received by (Printed Name)  C. Date of Delivery  ACTHUR M (REVINUAL  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:  No  MAR 2 9 2068
	3. Service Type  Cartified Mail
2. Article Number 7005 0390 0000	5269 3315

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

GOMPHAN IN CONTROL THIS SECTION	
Case 2 Use Weble 2 20 - VV 7 V - 1 - W	A. Signature
Print your name and address on the reverse	11 3. other
Attach this are return the card to use reverse	1 x Chitta > 1
Attach this card to the back of the mailpiece,  1. Article Advised in the card to you.	B Recei
Article Addressed to:  Article Addressed to:	B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address diff.
Calau 10:	D. Is delivery
COLONIAL BANE GROUP	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No
POBON 1100	address bolow
70204 7708	2:06CU270-WKW
MONTGOMERY AL	34C
80026 Z MM 36/01. 1108	3. Service Type
26/01. 1108	Certified Mail DExpress Mail
2 Artist	Insured Mail
2. Article Numbe	1. Restricted Delivery? (Extra Fee)
(Transfer from Service 1999) 0390 0000 F	☐ Yes
PS Form 3811, February 2004	בברך למם
Domestic Return	Receipt
	102595-02-M-1540
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